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TRANSMITTAL		Filing Date	09/24/20	03	101	100		
FORM		First Named Inventor	Benetti					
		Art Unit	3733			•		
(to be used for all correspondence after initial filing)		Examiner Name	Philogene	, Pedro	W 144	·— ···		
	10	Attorney Docket Number	GUID-008	CON2				
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ENCLOSURES (Check all that apply)  After Allowance Communication to TC								
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name	LAW OFFICE OF ALAN W.		· ·					
Signature	Signature //Waru							
Printed name	Printed name ALAN W. CANNON							
Date ///3/06		Reg. No.	34,977					
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents. P.O. Box 1450. Alexandria, VA 22313-1450 on								

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MARIA J. SOUSA

Date

2006

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Signature Mans	- John	Date 1/13/2006					
AMENDMENT UNDER	Attorney Docket	GUID-008CON2					
37 C.F.R. §1.111	Confirmation No.	2852					
3	First Named Inventor	Benetti					
	Application Number	10/670,152					
	Filing Date	09/24/2003					
Address to:	Group Art Unit	3733					
Commissioner for Patents	Examiner Name	Philogene, Pedro					
P.O. Box 1450	Title	Xyphoid Access for Surgical					
Alexandria, VA 22313-1450		Procedures					

Sir:

This amendment is responsive to the Office Action dated October 13, 2005 for which a three-month period for response was given making this response due on or before January 13, 2006. In view of the amendments to the claims and the remarks put forth below, reconsideration and allowance are respectfully requested.